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FORM OGC-3


 STATE OF MISSOURI  
 GEOLOGICAL SURVEY PROGRAM

## APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK NOV 23 2011

<input checked="" type="checkbox"/> APPLICATION TO DRILL		<input type="checkbox"/> DEEPEN		<input type="checkbox"/> PLUG BACK		<input checked="" type="checkbox"/> FOR AN OIL WELL		<input type="checkbox"/> OR GAS WELL	
NAME OF COMPANY OR OPERATOR						DATE			
Town Oil Company						10/31/2011			
ADDRESS				CITY		STATE		ZIP CODE	
16205 West 287th Street				Paola		KS		66071	
DESCRIPTION OF WELL AND LEASE									
NAME OF LEASE				WELL NUMBER		ELEVATION (GROUND)			
Dudzinsk				1		900			
(GIVE FOOTAGE FROM SECTION LINES)									
WELL LOCATION									
1485 ft. from <input type="checkbox"/> North <input checked="" type="checkbox"/> South section line 495 ft. from <input type="checkbox"/> East <input checked="" type="checkbox"/> West section line									
WELL LOCATION				LATITUDE		LONGITUDE		COUNTY	
Sec. 7 Township 45 North Range 31 <input checked="" type="checkbox"/> East <input type="checkbox"/> West				38.433581		94.241136		Cass	
NEAREST DISTANCE FROM PROPOSED LOCATION TO PROPERTY OR LEASE LINE 500 FEET									
DISTANCE FROM PROPOSED LOCATION TO NEAREST DRILLING, COMPLETED OR APPLIED - FOR WELL ON THE SAME LEASE 300 FEET									
PROPOSED DEPTH		DRILLING CONTRACTOR, NAME AND ADDRESS				ROTARY OR CABLE TOOLS		APPROX. DATE WORK WILL START	
300		Company Tools				Rotary		11/18/2011	
NUMBER OF ACRES IN LEASE		NUMBER OF WELLS ON LEASE INCLUDING THIS WELL, COMPLETED IN OR DRILLING TO THIS RESERVOIR 0							
		NUMBER OF ABANDONED WELLS ON LEASE 0							
IF LEASE PURCHASED WITH ONE OR MORE WELLS DRILLED, FROM WHOM PURCHASED?								NO. OF WELLS PRODUCING 0	
NAME								INJECTION 0	
ADDRESS								INACTIVE 0	
								ABANDONED 0	
STATUS OF BOND				<input type="checkbox"/> SINGLE WELL AMOUNT \$		<input checked="" type="checkbox"/> BLANKET BOND AMOUNT \$ 80,000.00		<input checked="" type="checkbox"/> ON FILE	
								<input type="checkbox"/> ATTACHED	

REMARKS: (IF THIS IS AN APPLICATION TO DEEPEN OR PLUG BACK, BRIEFLY DESCRIBE WORK TO BE DONE, GIVING PRESENT PRODUCING/INJECTION ZONE AND EXPECTED NEW INJECTION ZONE; USE BACK OF FORM IF NEEDED)

PROPOSED CASING PROGRAM				APPROVED CASING - TO BE FILLED IN BY STATE GEOLOGIST			
AMOUNT	SIZE	WT/FT	CEMENT	AMOUNT	SIZE	WT/FT	CEMENT
20'	6 1/4"	14	4	20'	6 1/4"	14	Full
300'	2 7/8"	6.5	40	300'	2 7/8"	6.5	length

 I, the Undersigned, state that I am the President of the Town Oil (Company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct, and complete to the best of my knowledge.

 SIGNATURE Lester Town DATE 11/15/2011

PERMIT NUMBER 037-20849	<input checked="" type="checkbox"/> DRILLER'S LOG REQUIRED <input checked="" type="checkbox"/> CORE ANALYSIS REQUIRED IF RUN <input type="checkbox"/> SAMPLES REQUIRED <input checked="" type="checkbox"/> SAMPLES NOT REQUIRED <input type="checkbox"/> WATER SAMPLES REQUIRED AT	<input checked="" type="checkbox"/> E-LOGS REQUIRED IF RUN <input checked="" type="checkbox"/> DRILL SYSTEM TEST INFO REQUIRED IF RUN
APPROVED DATE 11-23-11		
APPROVED BY <u>Joseph A. [Signature]</u>		

NOTE THIS PERMIT NOT TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER LOCATION.

APPROVAL OF THIS PERMIT BY THE OIL AND GAS COUNCIL DOES NOT CONSTITUTE ENDORSEMENT OF THE GEOLOGIC MERITS OF THE PROPOSED WELL NOR ENDORSEMENT OF THE QUALIFICATIONS OF THE PERMITTEE

I, \_\_\_\_\_ of the \_\_\_\_\_ (Company), confirm that an approved drilling permit has been obtained by the owner of this well. Council approval of this permit will be shown on this form by presence of a permit number and signature of authorized council representative.

DRILLER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Peculiar

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NOV 23 2011

FORM OGC-1



STATE OF MISSOURI  
MISSOURI DEPARTMENT OF NATURAL RESOURCES  
GEOLOGICAL SURVEY PROGRAM  
**WELL LOCATION PLAT**

Mo Oil &amp; Gas Council

OWNER'S NAME

Town Oil Company

COUNTY

Cass

LEASE NAME

Dudzinski

(GIVE FOOTAGE FROM SECTION LINES)

WELL LOCATION

4500 <sup>1495</sup> ft. from☐ North☒ South from section line

495 ft. from

☐ East☒ West from section line

WELL LOCATION

Sec. 7 Township 45 North Range 31 ☐ East ☒ West

LONGITUDE

94.241153

LATITUDE

38.433642

West Section Line

OK

2 1/2 acre  
spacing requirement

Property Line

495

1495

South Section Line

REMARKS

## INSTRUCTIONS

On the above plat, show distance of the proposed well from the two nearest section lines, the nearest lease line, and from the nearest well on the same lease completed in or drilling to the same reservoir. Do not confuse survey lines with lease lines. See rule 10 CSR 50-2.030 for survey requirements. Lease lines must be marked.

This is to certify that I have executed a survey to accurately locate oil and gas wells in accordance with 10 CSR 50-2.030 and that the results are correctly shown on the above plat.

REGISTERED LAND SURVEYOR

NUMBER

REMIT TWO (2) COPIES TO:  
GEOLOGICAL SURVEY PROGRAM  
PO BOX 250, ROLLA, MO 65402-0250 (573) 368-2143  
ONE (1) COPY WILL BE RETURNED